# **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Ter	rms Freight Terms	Ship Via		11110=1/10 000000=		
Net 30	FOB Dest. Prepaid & Allowed	BEST WAY	Purchase Order	HHSTX-3-00003057	<i>(21</i>	
	by informal bid, Invitation for Offer, or Requ		Date	Revision	Page	
1	s, terms, and conditions set forth in the advert		11/29/22		1	
guarantees go requirements	esponses become a part of this numbered pur bods or services delivered meet or exceed nur cs, shipping papers, invoices, and correspond	nbered purchase order	Ship To:	5998 - Richmond:2100 Preston HEALTH & HUMAN SERVICES COMMISSION 2100 Preston Richmond TX 77469		
_	with our Purchase Order Number.			United States		
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 4001 Highway 36 South Brenham TX 77833 United States	1	
			Fax: Email:	979/277-1865 712Accounting@hhs.texas.gov		

Quantity

**Purchaser:** 

**UOM** 

Agency Contact: Diana Dockal

Phone: 281/344-4277

Line-Sch

EMAIL: diana.dockal@dshs.texas.gov

HHSC PCS CONTACT: Patricia Fletcher

Phone: 512-406-2538

EMAIL: Patricia. Fletcher@hhsc.state.tx.us

VENDOR: South Central Supply

Name Hope Craft Tel # 512/367-0311

Email:sales@supplytexas.com

Please find a copy of our standard terms and conditions attached.

**Inventory Item ID - Line Description** 

Please confirm receipt of this purchase order.

#### NOTE: FREIGHT TERMS ARE FOB DESTINATION PREPAY AND ALLOW

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

Class/Item

Invoice per 34 TAC §20.487, amended effective May 1, 2022

1-1 310-06 1.00 BOX 44.93000 \$44.93 12/12/2022

Redi-Seal Security Tinted Window Envelope, Contemporary, #10, White, 500/box; Supplier Part # 34432; Mfg# QUA21418; Smartbuy

Schedule Total	\$44.93
Item Total for Line 1	\$44.93

\$44.93

Total PO Amount

Fletcher, Patricia Rose

Extended Amt

**Due Date** 

PO Price

# **Health and Human Services Commission**

### **Purchase Order**

**Dispatch via Print** 

Payment To Net 30	FOB Dest. Prepaid & Allowed	<b>Ship V</b> i BEST V		Purchase Order		HHSTX-3-0000305727
specification	by informal bid, Invitation for Offer, or Request, terms, and conditions set forth in the advert	tisement and ver	<b>Date</b> 11/29/22	11/29/22		
guarantees g requirement All shipmen	responses become a part of this numbered pur goods or services delivered meet or exceed nur s. nts, shipping papers, invoices, and correspon archase Order Number.	nbered purchase	Ship To:			
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSI 4001 Highway 36 South Brenham TX 77833 United States	6 South
				Fax: Email:	979/277-1865 712Accounting@	hhs.texas.gov
				Purchaser:	Fletcher,Patrici	a Rose
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date

No substitutions or cancellations are permitted without prior approval by Health & Human Services Commission. If contractor fails to deliver by promised delivery date (or reasonable time thereafter) or fails to meet requirements, Health & Human Services Commission reserves the right to purchase elsewhere and charge an increased cost and handling to contractor.

Over shipments will not be accepted unless authorized by Buyer prior to shipment. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the Health & Human Services Commission and Contractor to attempt to resolve all disputes arising under the contract

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Authorized By Patricia Fletcher, CIPM

11/29/2022